

1 EDMUND G. BROWN JR., Attorney General
of the State of California
2 GREGORY J. SALUTE
Supervising Deputy Attorney General
3 NANCY A. KAISER, State Bar No. 192083
Deputy Attorney General
4 California Department of Justice
300 So. Spring Street, Suite 1702
5 Los Angeles, CA 90013
Telephone: (213) 897-5794
6 Facsimile: (213) 897-2804

7 Attorneys for Complainant

8
9 **BEFORE THE**
BOARD OF REGISTERED NURSING
10 **DEPARTMENT OF CONSUMER AFFAIRS**
11 **STATE OF CALIFORNIA**

12 In the Matter of the Accusation Against:

Case No. 2009-176

13 **KELLEY LEE COUSINO AKA KELLEY**
LEE BROWN

A C C U S A T I O N

14 aka Kelley Lee Brown
2012 Cedar Grove Drive
15 Durham, NC 27703

16 **Registered Nurse License No. 605411**

17 Respondent.

18
19 Complainant alleges:

20 **PARTIES**

21 1. Ruth Ann Terry, M.P.H, R.N. (Complainant) brings this Accusation solely
22 in her official capacity as the Executive Officer of the Board of Registered Nursing, Department
23 of Consumer Affairs.

24 2. On or about August 27, 2002, the Board of Registered Nursing issued
25 Registered Nurse License Number 605411 to Kelley Lee Cousino aka Kelley Lee Brown
26 (Respondent). The Registered Nurse License expired on September 30, 2006, and has not been
27 renewed.
28

- 1
- 2
- 3
- 4
- 5
- 6
- 7
- 8
- 9
- 10
- 11
- 12
- 13
- 14
- 15
- 16
- 17
- 18
- 19
- 20
- 21
- 22
- 23
- 24
- 25
- 26
- 27
- 28

- 2
- 3
- 4

5

6
7
8

9
10
11
12
13

14

15

16

17

18

19

20

21

22
23
24

25

26
27

28

1 (1) Formulates a nursing diagnosis through observation of the client's
2 physical condition and behavior, and through interpretation of information
obtained from the client and others, including the health team.

3 (2) Formulates a care plan, in collaboration with the client, which ensures
4 that direct and indirect nursing care services provide for the client's safety,
5 comfort, hygiene, and protection, and for disease prevention and restorative
measures.

6 (3) Performs skills essential to the kind of nursing action to be taken,
7 explains the health treatment to the client and family and teaches the client and
family how to care for the client's health needs.

8 (4) Delegates tasks to subordinates based on the legal scopes of practice of
9 the subordinates and on the preparation and capability needed in the tasks to be
delegated, and effectively supervises nursing care being given by subordinates.

10 (5) Evaluates the effectiveness of the care plan through observation of the
11 client's physical condition and behavior, signs and symptoms of illness, and
reactions to treatment and through communication with the client and health team
members, and modifies the plan as needed.

12 (6) Acts as the client's advocate, as circumstances require, by initiating
13 action to improve health care or to change decisions or activities which are against
14 the interests or wishes of the client, and by giving the client the opportunity to
make informed decisions about health care before it is provided.

15 COST RECOVERY

16 9. Section 125.3, subdivision (a), of the Code states, in part:

17 Except as otherwise provided by law, in any order issued in resolution of a
18 disciplinary proceeding before any board within the department . . . the board may
19 request the administrative law judge to direct a licentiate found to have committed
a violation or violations of the licensing act to pay a sum not to exceed the
reasonable costs of the investigation and enforcement of the case.

20 STATEMENT OF FACTS

21 10. On or about August 31, 2002, while employed as a registry nurse,
22 Respondent worked at UCLA Medical Center, in Los Angeles, California during the day shift.
23 She was assigned to care for patient J. J., a two year-old male with a heart condition. On or
24 about August 27, 2002, patient J. J. had undergone heart surgery without complication.

25 11. At 0800 Respondent charted under Patient Care Observations: Patient
26 alert and oriented. Patient has no complaints of pain. Patient on [heart] monitor. On room air
27 with oxygen saturations >95%. Heart Rate 120-125. Respiratory rate 22-24. The initial
28 assessment and assessment charting contained a list of safety checks. "Monitor alarms and limits

1 set" was at the top of the safety checklist. Respondent did not check whether the heart monitor's
2 alarms were working and/or properly set.

3 12. At 0803, the patient's mother called Respondent over to the patient and
4 asked whether the patient was having a seizure. The patient's heart rate had decreased to 50-60s
5 and his respiratory rate had decreased to 12-16. There is no documentation of the patient's vital
6 signs during those three minutes.

7 13. At 0804 Respondent called a Code Blue¹ after the patient's breathing
8 shallowed and his heart rate was at 50's. An ambubag² was started on patient. The patient was
9 transferred to the intensive care unit and an ECMO³ started. A CVVH⁴ was also started due to
10 poor kidney function. After a neurological examination and a multi-system failure, it was
11 decided to withdraw support, and the patient died on September 3, 2002.

12 **FIRST CAUSE FOR DISCIPLINE**

13 **(Incompetence)**

14 14. Respondent has subjected her license to disciplinary action under section
15 2761, subdivision (a)(1), on the grounds of unprofessional conduct, in conjunction with
16 California Code of Regulations, title 16, sections 1443 and 1443.5, in that Respondent was
17 incompetent in the care of patient J. J., as follows:

18 a. Respondent failed to check whether the patient's bedside heart monitor
19 alarms were working and limits were properly set, as more fully described in paragraph 11,
20

21 1. Hospital Emergency Codes are used in hospitals worldwide to alert staff to various
22 emergency situations. Code Blue is generally used to indicate a patient requiring immediate
23 resuscitation, most often as the result of a cardiac arrest.

24 2. An Ambu bag is a hand-held device used to provide ventilation to a patient who is not
25 breathing or who is breathing inadequately.

26 3. Extracorporeal membrane oxygenation (ECMO) is an extracorporeal (situated outside
27 the body) technique of providing both cardiac and respiratory support oxygen to patients whose
28 heart and lungs are so severely diseased that they can no longer serve their function.

4. Continuous venovenous hemofiltration (CVVH) is a system used to support patients
with acute kidney failure.

1 above. If a patient's heart rate decreases and the monitor's alarms are not appropriately set, the
2 initiation of CPR could be delayed. A delay of three minutes for CPR initiation could
3 significantly change a patient's outcome.

4 b. Respondent failed to initiate a Code Blue at 0803 and have CPR started, as
5 more fully described in paragraph 12, above. Standard CPR guidelines are to initiate treatment
6 on a pediatric patient when the heart rate is below 60 bpm. At the time of the incident,
7 Respondent possessed a Pediatric Advanced Life Support certification.

8 **SECOND CAUSE FOR DISCIPLINE**

9 **(Unprofessional Conduct)**

10 15. Respondent has subjected her license to disciplinary action under section
11 2761, subdivision (a), of the Code, in that Respondent committed acts of unprofessional conduct,
12 as more fully described in paragraphs 10 through 14, above.

13 **PRAYER**


14 WHEREFORE, Complainant requests that a hearing be held on the matters herein
15 alleged, and that following the hearing, the Board of Registered Nursing (Board) issue a decision:

16 1. Revoking or suspending Registered Nurse License Number 605411, issued
17 to Kelley Lee Cousino aka Kelley Lee Brown;

18 2. Ordering Kelley Lee Cousino aka Kelley Lee Brown to pay the Board the
19 reasonable costs of the investigation and enforcement of this case, pursuant to Business and
20 Professions Code section 125.3; and,

21 3. Taking such other and further action as deemed necessary and proper.

22 DATED: 2/17/09
23

24 
25 RUTH ANN TERRY, M.P.H., R.N.
26 Executive Officer
27 Board of Registered Nursing
28 Department of Consumer Affairs
State of California
Complainant